

FENWICK & WEST LLP

SAN FRANCISCO OFFICE | EMBARCADERO CENTER WEST

275 BATTERY ST., SUITE 1500 | SAN FRANCISCO, CA 94111

TEL 415.875.2300 | FAX 415.281.1350 | WWW.FENWICK.COM

RECEIVED

CENTRAL FAX CENTER

DEC 16 2004

FACSIMILE TRANSMISSION

CONFIDENTIAL

DATE: December 16, 2004

CLIENT-MATTER No.: 22725-5869

To:

NAME	FAX NO.	PHONE NO.
Examiner Jamisue A. Webb Group Art Unit 3627 Commissioner for Patents	(703) 872-9306	(703) 308-8579

FROM: Brian M. Hoffman PHONE: (415) 875-2484
Reg. No. 55,062

SENT BY: Tiffany Bell PHONE: (415) 875-2445

NUMBER OF PAGES WITH COVER PAGE: 16 | ORIGINAL WILL NOT FOLLOW

MESSAGE:

Application No.: 09/939,206
 Filing Date: August 24, 2001
 Inventor(s): James Gill *et al.*
 Title: Freight Rate Manager
 Examiner: Jamisue A. Webb
 Group Art Unit: 3629

Please See Attached Amendment A

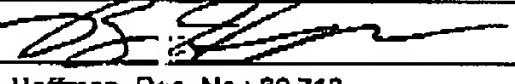
CAUTION - CONFIDENTIAL

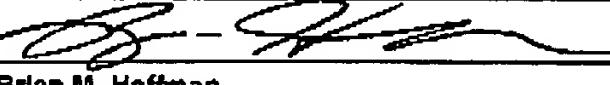
THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE OR THEIR DESIGNEE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

IF YOU DO NOT RECEIVE ALL OF THE PAGES, OR IF THEY ARE NOT CLEAR,
 PLEASE CALL TIFFANY BELL AT (415) 875-2445 AS SOON AS POSSIBLE.

		Application Number	09/939,206
		Filing Date	August 24, 2001
TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>		First Named Inventor	James M. GII
		Group Art Unit Number	3629
		Examiner Name	Jamisue A. Webb
Total Number of Pages in This Submission	15	Attorney Docket Number	22725-05869

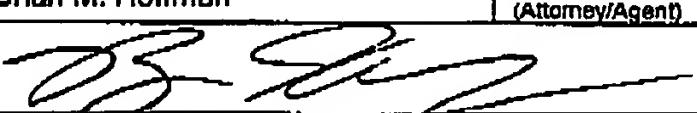
ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Copy of Notice to File Missing Parts <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Statement Under 37 CFR 3.73(b) <input type="checkbox"/> Copy of Assignment <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input checked="" type="checkbox"/> Amendment/Response: (12) Page(s) <input type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Format Drawing(s): <input type="checkbox"/> () Sheet(s) of Figure(s) () <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT			
Signature:			
Attorney/Reg. No.:	Brian M. Hoffman, Reg. No.: 39,713	Dated:	December 16, 2004

CERTIFICATE OF FACIMILE TRANSMISSION			
I hereby certify that this correspondence, including the enclosures identified above, is being sent via facsimile to the U.S. Patent and Trademark Office at facsimile number (703) 872-9308 and addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date printed below:			
Signature:			
Typed or Printed Name:	Brian M. Hoffman	Dated:	December 16, 2004
Express Mail Mailing Number (optional):			

FEET TRANSMITTAL for FY 2005		<i>Complete If Known</i>	
Patent fees are subject to annual revision.		Application Number	09/939,206
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	August 24, 2001
TOTAL AMOUNT OF PAYMENT (\$) 510.00		First Named Inventor	James A. Webb
		Examiner Name	Jamisue A. Webb
		Art Unit	3629
		Attorney Docket No.	22725-05869

METHOD OF PAYMENT (check all that apply)		FEET CALCULATION (continued)																																																																																																																																									
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number 19-2555 Deposit Account Name Fenwick & West LLP The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>Fee Code (\$)</td><td>Fee Code (\$)</td><td>Fee Description</td><td>Fee Paid</td></tr> <tr><td>1051</td><td>130</td><td>2051 65</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052 25</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053 130</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812 2,520</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804 920*</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805 1,840*</td><td></td></tr> <tr><td>1251</td><td>120</td><td>2251 60</td><td></td></tr> <tr><td>1252</td><td>450</td><td>2252 225</td><td></td></tr> <tr><td>1253</td><td>1,020</td><td>2253 510</td><td></td></tr> <tr><td>1254</td><td>1,560</td><td>2284 795</td><td></td></tr> <tr><td>1255</td><td>2,160</td><td>2255 1,080</td><td></td></tr> <tr><td>1401</td><td>500</td><td>2401 250</td><td></td></tr> <tr><td>1402</td><td>500</td><td>2402 250</td><td></td></tr> <tr><td>1403</td><td>1,000</td><td>2403 500</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451 1,510</td><td></td></tr> <tr><td>1452</td><td>600</td><td>2452 250</td><td></td></tr> <tr><td>1453</td><td>1,500</td><td>2453 750</td><td></td></tr> <tr><td>1501</td><td>1,400</td><td>2501 700</td><td></td></tr> <tr><td>1502</td><td>800</td><td>2502 400</td><td></td></tr> <tr><td>1503</td><td>1,100</td><td>2503 550</td><td></td></tr> <tr><td>1480</td><td>—</td><td>1460 —</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807 50</td><td></td></tr> <tr><td>1808</td><td>180</td><td>1806 180</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021 40</td><td></td></tr> <tr><td>1809</td><td>790</td><td>2809 395</td><td></td></tr> <tr><td>1810</td><td>790</td><td>2810 395</td><td></td></tr> <tr><td>1801</td><td>790</td><td>2801 395</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802 900</td><td></td></tr> <tr><td colspan="4">Other fee (specify) _____</td></tr> <tr> <td colspan="2">SUBTOTAL (1) (\$) .00</td> <td colspan="2">SUBTOTAL (3) (\$) 510.00</td> </tr> <tr> <td colspan="4">*or number previously paid, if greater. For Reissues, see above</td> </tr> <tr> <td colspan="4"> Reduced by Basic Filing Fee Paid </td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid	1051	130	2051 65		1052	50	2052 25		1053	130	1053 130		1812	2,520	1812 2,520		1804	920*	1804 920*		1805	1,840*	1805 1,840*		1251	120	2251 60		1252	450	2252 225		1253	1,020	2253 510		1254	1,560	2284 795		1255	2,160	2255 1,080		1401	500	2401 250		1402	500	2402 250		1403	1,000	2403 500		1451	1,510	1451 1,510		1452	600	2452 250		1453	1,500	2453 750		1501	1,400	2501 700		1502	800	2502 400		1503	1,100	2503 550		1480	—	1460 —		1807	50	1807 50		1808	180	1806 180		8021	40	8021 40		1809	790	2809 395		1810	790	2810 395		1801	790	2801 395		1802	900	1802 900		Other fee (specify) _____				SUBTOTAL (1) (\$) .00		SUBTOTAL (3) (\$) 510.00		*or number previously paid, if greater. For Reissues, see above				Reduced by Basic Filing Fee Paid			
Large Entity	Small Entity	Fee Description	Fee Paid																																																																																																																																								
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid																																																																																																																																								
1051	130	2051 65																																																																																																																																									
1052	50	2052 25																																																																																																																																									
1053	130	1053 130																																																																																																																																									
1812	2,520	1812 2,520																																																																																																																																									
1804	920*	1804 920*																																																																																																																																									
1805	1,840*	1805 1,840*																																																																																																																																									
1251	120	2251 60																																																																																																																																									
1252	450	2252 225																																																																																																																																									
1253	1,020	2253 510																																																																																																																																									
1254	1,560	2284 795																																																																																																																																									
1255	2,160	2255 1,080																																																																																																																																									
1401	500	2401 250																																																																																																																																									
1402	500	2402 250																																																																																																																																									
1403	1,000	2403 500																																																																																																																																									
1451	1,510	1451 1,510																																																																																																																																									
1452	600	2452 250																																																																																																																																									
1453	1,500	2453 750																																																																																																																																									
1501	1,400	2501 700																																																																																																																																									
1502	800	2502 400																																																																																																																																									
1503	1,100	2503 550																																																																																																																																									
1480	—	1460 —																																																																																																																																									
1807	50	1807 50																																																																																																																																									
1808	180	1806 180																																																																																																																																									
8021	40	8021 40																																																																																																																																									
1809	790	2809 395																																																																																																																																									
1810	790	2810 395																																																																																																																																									
1801	790	2801 395																																																																																																																																									
1802	900	1802 900																																																																																																																																									
Other fee (specify) _____																																																																																																																																											
SUBTOTAL (1) (\$) .00		SUBTOTAL (3) (\$) 510.00																																																																																																																																									
*or number previously paid, if greater. For Reissues, see above																																																																																																																																											
Reduced by Basic Filing Fee Paid																																																																																																																																											

SUBMITTED BY		<i>Complete (if applicable)</i>		
Name (Print/Type)	Brian M. Hoffman		Registration No. (Attorney/Agent)	39,719
Signature			Date	12/16/04